DECLARATION FOR NON-PROVISIONAL PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. beneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled HAPTEN-CARRIER CONJUGATES FOR USE IN DRUG ABUSE THERAPY AND METHODS FOR PREPARATION OF SAME

and for which a patent application:

- is attached hereto and includes amendment(s) filed on (if applicable)
- was filed in the United States on August 22, 2003 as Application No. 10/647,071 (for declaration not accompanying application) with amendment(s) filed on (if applicable)
- was filed as PCT international Application No. on and was amended under PCT Article 19 on ((f. applicable)

I hereby authorize and request the attorneys at Jones Day to insert herein parentheses (Application No. ______filed ______) the filing date and application number of said application when known.

I hereby state that I have reviewed and understand the contents of the above identified application, including the claims, as amended by any amendment referred to above.

l acknowledge the duty to disclose information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations,§1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is elaimed:

EARLIEST FOREIGN APPLICATION(S), IF ANY, FILED PRIOR TO THE FILING DATE OF THE APPLICATION							
APPLICATION NUMBER	COUNTRY	DATE OF FILING (day, month, year)	PRIORITY CLAIMED				
			YES []	NO 🗇			
			YES []	NO □			

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.

PROVISIONAL APPLICATION NUMBER	FILING DATE

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code §112. a lacknowledge the duty to disclose information known to me which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filling date of the prior application and the national or PCT international filling date of this application:

NON-PROVISIONAL APPLICATION SERIAL NO.	FILING DATE	STATUS		
ATT DICTITION OF DEATH INC.		PATENTED	PENDING	ABANDONED
08/720,487	September 30, 1996	0		

For use only when the application is assigned to a company, partnership or other organization.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may joopardize the validity of the application or any patent issuing thereon.

	FULL NAME	LAST NAME	FIRST NAME	MIDDLE NAME		
	OF INVENTOR	Swain	Philip	A.		
2	RESIDENCE &	CITY	STATE OR FOREIGN COLINTRY	COUNTRY OF CITIZES		
0	CITIZENSHIP	Beaconsfield	Quebec, Canada	United Kingd		
	POST OFFICE	50 Kirkwood Avenue	CITY Beaconsfield	STATE OR COUNTRY		
	ADDRESS	30 Kirkwood Avenue	Beaconstield	Quebec, Canada	H9W 5L	
		SIGNATURE OF INVENTOR 201	/	DATE	/	
		And new		Mar.	17'00	
	FULL NAME OF INVENTOR	LAST NAME Schad	FIRST NAME Victoria	MIDDLE NAME		
2	RESIDENCE &	gry	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZEN		
0	CITIZENSHIP	Lakeville	MA	United States		
۷	POST OFFICE	STREET	спу	STATE OR COUNTRY	ZIP CODE	
	ADDRESS	24 County Street	Lakeville	MA	02347	
		SIGNATURE OF INVENTOR 202		DATE		
	FULL NAME	LAST NAME	FIRST NAME	MIDDLE NAME		
2 0 3	OF INVENTOR	Greenstein	Julia	L.		
	RESIDENCE & CITIZENSHIP	Newton	STATE OR POREIGN COUNTRY MA		United States of America	
	CITIZENSIII	STREET	CITY		STATE OR COUNTRY ZIP CODE	
	POST OFFICE ADDRESS	174 Mount Veronon Street	Newton	MA	02465	
		SIGNATURE OF INVENTOR 200		DATE	L	
	FULL NAME	LAST NAME	FIRST NAME	MIDDLE NAME		
	OF INVENTOR	Exley	Mark	A.		
	RESIDENCE &	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENS	HIP	
	CITIZENSHIP	Chestnut Hill	MA	United Kingdon	m	
	POST OFFICE	STREET	спу	STATE OR COUNTRY	ZIP CODE	
	ADDRESS	201 Reservoir Road	Chestnut Hill	MA	02467	
		SIGNATURE OF INVENTOR 204		DATE		
	FULL NAME	LAST NAME	FIRST NAME	MIDDLE NAME		
	OF INVENTOR	Fox	Barbara	S.		
	RESIDENCE &	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENS		
	CITIZENSHIP	Wayland	MA	United States of		
		STREET	стту	STATE OR COUNTRY	ZIP CODE	
	POST OFFICE		*** * *			
	POST OFFICE ADDRESS	26 Pemberton Rd.	Wayland	MA	01778	

	ADDRESS	56 Knowlton Circle SIGNATURE OF INVENTOR 2015	Upton	MA DATE	01568
ľ	POST OFFICE	STREET	СПУ	STATE OR COUNTRY	ZIP CODE
0	RESIDENCE & CITIZENSHIP	спу Upton	STATE OR FOREIGN COUNTRY MA	COUNTRY OF CITIZENS United States of	
	FULL NAME OF INVENTOR	Powers	FIRST NAME Stephen	P.	

As a below named inventor, I hereby declare that:

DECLARATION FOR NON-PROVISIONAL PATENT APPLICATION'

My residence, post office address and citizenship are as stated below at 201 et seq. beneath my name,
I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled
HAPTEN-CARRIER CONJUGATES FOR USE IN DRUG ABUSE THERAPY AND METHODS FOR PREPARATION OF SAME
and for which a patent application:

8110	d for which a patcht application:
	is attached hereto and includes amendment(s) filed on (frapplicable)
×	was filed in the United States on August 22, 2003 as Application No. 10/647,071 (for declaration not accompanying application) with amendment(s) filed on @factionion
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	ereby authorize and request the attorneys at Jones Day to insert herein parentheses (Application Nofiled) the filing te and application number of said application when known.
	areby state that I have reviewed and understand the contents of the above identified upplication, including the claims, as ununded by any seadment referred to above.
l as	cknowledge the duty to disclose information known to me to be material to patentability as defined in Title 37, Code of Federal

Taking whose used to underse information known to me to be material to patentially as defined in 1 file 37, Code of Pederal Regulations §1.56.

Thereby claim foreign priority benefits under Title 35, United States Code, §119(a)(d) of any foreign application(s) for patent or inventor's

I neretoy claim invergin priority cenetitis under 1 inc 33, United States Code, § 117(a)-(d) of any foreign application(s) for patent or inventor's certificate lasted below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

EARLIEST FOREIGN APPLICATION(S), IF ANY, FILED PRIOR TO THE FILING DATE OF THE APPLICATION							
APPLICATION NUMBER	COUNTRY	DATE OF FILING (day, month, year)	PRIORITY CLAIMED				
			YES 🗆	NO 🗆			
			YES 🗆	NO 🗆			

1 hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.

PROVISIONAL APPLICATION NUMBER	FILING DATE

I hereby claim the benefit under Title 33, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior buthod States application in the manner provided by the first puragraph of Title 33, United States Code § 112.1 acknowledge the duty to disclose information known to un which is material to paternability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

NON-PROVISIONAL APPLICATION SERIAL NO.	FILING DATE	STATUS		
AT LICITION SERIAL NO.		PATENTED	PENDING	ABANDONED
08/720,487	September 30, 1996	Ø		

For use only when the application is assigned to a company, partnership or other organization.

JONES DAY DOCKET NO. 11662-003-999

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

			.,		
	FULL NAME	LAST NAME	PIRST NAME	MEDDIJE NAME	
	OF INVENTOR	Swain	Philip	A.	
2	RESIDENCE &	спу	STATE OR POREIGH COUNTRY	COUNTRY OF CITIZEN	
0	CITIZENSHIP	Beaconsfield	Quebec, Canada	United Kingdo	HT1
1		STREET	CITY	STATE OF COUNTRY	ZIP CODS
	POST OFFICE ADDRESS	50 Kirkwood Avenue	Beaconsfield	Quebec, Canada	H9W 5L4
		SIGNATURE OF INVENTOR 201		DATE	
	FULL NAME OF INVENTOR	Schad	PRET NAME Victoria	MIDDLE NAME C,	
2	RESIDENCE &	any	STATE OR POREIGN COUNTRY	COUNTRY OF CITIZENS	unp
0	CITIZENSHIP	Lakoville	МА	United States of	
_	POST OFFICE ADDRESS	24 County Street	Lakeville	MA.	2IP COOR 02347
		SIGNATURE OF INVENTOR 201/ Sel	Lal .	DATE //	23/09
	FULL NAME OF INVENTOR	Greenstein	HEST HAMB Julia	MIDDLE HAME	
2		CITY	STATE OR POREIGN COUNTRY	COUNTRY OF CITIZONS	· · · · · · · · · · · · · · · · · · ·
0	RESIDENCE &	Newton	MA	United States o	
	CITEDINA	STREET	OTY	STATE OR COUNTRY	ZIP COOK
	POST OFFICE ADDRESS	174 Mount Veronon Street	Newton	MA	02465
		SIGNATURE OF DIVENTOR 203		DATE	
	FULL NAME	LAST NAME	PEST HAME	MODOLE NAME	
	OF INVENTOR	Exley	Mark	A.	
2	RESIDENCE &	CITY	STATE OF PORESON COUNTRY	COUNTRY OF CITIZENS	
0	CITIZENSHIP	Chestnut Hill	MA	United Kingdor	
4		STREET	CITY	STATE OR COUNTRY	ZIP CODE
	ADDRESS	201 Reservoir Road	Chestnut Hill	MA	02467
		SIGNAYURE OF INVENTOR 204		DATE	
	FULL NAME	LAST NAME	FIRST NAME	MEDDLENAME	
	OF INVENTOR	Fox	Barbara	S.	
0	RESIDENCE & CITIZENSHIP	CITY Wayland	STATE OR FORDIGN COUNTRY MA	United States of	
5		STREET	CITY	STATE OR COUNTRY	ZIF CORE
	POST OFFICE ADDRESS	26 Pemberton Rd.	Wayland	MA	01778
		SIGNATURE OF INVENTOR 203		DATE	

IONES DAY DOCKET NO. 11662-003-999

	FULL NAME OF INVENTOR	Powers	PREST NAME Stephen	P.	
0	RESIDENCE & CITIZENSHIP	crrv Upton	STATE OR FOREIGN COUNTRY MA	COUNTRY OF CITIZENS United States of	
0	POST OFFICE ADDRESS	56 Knowlton Circle	Onv Upton	MA STATE OR COUNTRY	ZIP CODE 01568
SIGNATURE OF INVENTOR 265			DATE		

DECLARATION FOR NON-PROVISIONAL PATENT APPLICATION

As a below named inventor. I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seg, beneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names

are	listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled
HAI	PTEN-CARRIER CONJUGATES FOR USE IN DRUG ABUSE THERAPY AND METHODS FOR PREPARATION OF SAME
and	for which a patent application:
	is attached hereto and includes amendment(s) filed on (if applicable)
×	was filed in the United States on August 22, 2003 as Application No. 10/647,071 (for declaration not accompanying application) with amendment(s) filed on (dapplicable)
	was filed as PCT international Application No. on and was amended under PCT Article 19 on (of applicable)
	reby authorize and request the attorneys at Jones Day to insert herein parentheses (Application Nofiled) the filing and application number of said application when known.
	reby state that I have reviewed and understand the contents of the above identified application, including the claims, as amended by any

I acknowledge the duty to disclose information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, \$1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

EARLIEST FOREIGN AP	PLICATION(S), IF ANY, FILE	D PRIOR TO THE FILING DATE O	F THE APPLICAT	TION
APPLICATION NUMBER	COUNTRY	DATE OF FILING (day, month, year)	PRIORITY	CLAIMED
			. YES 🗆	NO □
			YES □	NO □

I hereby claim the benefit under Title 35, United States Code, \$119(e) of any United States provisional application(s) listed below.

PROVISIONAL APPLICATION NUMBER	FILING DATE

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NON-PROVISIONAL	FILING DATE		STATUS	
APPLICATION SERIAL NO.		PATENTED	PENDING	ABANDONED
08/720,487	September 30, 1996	⊠		

For use only when the application is assigned to a company, partnership or other organization.

Thereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

LIFE SCIENCE ADVISOR

	OF INVENTOR	Swain	Philip	MIDIN F NAME	
0	RESIDENCE & CITIZENSHIP	Beaconsfield	STATE OR FORFION COUNTRY Quebec, Canada	United Kingd	
	POST OFFICE ADDRESS	50 Kirkwood Avenue	Beaconsfield	STATE OR COUNTRY Quebec, Canada	H9W 5L
		SIGNATURE OF INVENTOR 201		DATE	-
	FULL NAME OF INVENTOR	LASI NAME Schad	FIRST NAME	MIDOLE NAME	
2	RESIDENCE &	CITY	Victoria STATE OR FOREIGN COUNTRY	C,	SHP
2	CITIZENSHIP	Lakeville	MA	United States	of America
	POST OFFICE ADDRESS	24 County Street	Lakeville	STATE OR COUNTRY MA	2IP CODE 02347
		SIGNATURE OF INVENTOR 202		DAIR	
	FULI. NAME	LAST NAME	FIRST NAME	MIDDI F NAME	
,	OF INVENTOR	Greenstein	Julia	L.	
	RESIDENCE & CITIZENSHIP	Newton	STATE OR FOREIGN COUNTRY MA	United States of	
	POST OFFICE ADDRESS	174 Mount Veronon Street	Newton	STATE OR COUNTRY MA	211 CODE 02465
		SIGNATURE OF INVENTOR 2003	. 1	11/13/	-c.
-1	FULL NAME	LAST NAME	TIRSY NAME		09
f	OF INVENTOR	Exley	Mark	MIDDLE NAME A.	
- 1	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CENZENSE	ne .
	CITIZENSHIP	Chestnut Hill	MA	United Kingdor	
	POST OFFICE ADDRESS	STREET 201 Reservoir Road	Chestnut Hill	MA STATE OR COUNTRY	z⊭cope 02467
		SIGNATURE OF INVENTOR 214		DATE	
	FUEL NAME	LAST NAME FOX	PRST NAME Barbara	MIDDLE NAME	
ı	RESIDENCE &	cmy	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSI	
		Wayland	MA	United States of	
		STREET 26 Pemberton Rd.	Wayland	STATE OF COUNTRY	ZIP CODE 01778

	FULL NAME	LAST NAME	FIRST NAME	MIDDLE NAME	
	OF INVENTOR	Powers	Stephen	P.	
2	RESIDENCE &	спү	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENS	302
0	CITIZENSHIP	Upton	MA	United States of	of America
0		STREET	cmy	STATE OF COUNTRY	ZIP CODE
	POST OFFICE ADDRESS	56 Knowlton Circle	Upton	MA	01568
		SIGNATURE OF INVENTOR 206		DATE	*

) the filing

and was amended under PCT Article 19 on (f applicable)

filed

DECLARATION FOR NON-PROVISIONAL PATENT APPLICATION

I D

As a below named inventor	I he	ncby	declare	that:
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with amendment(s) filed on (fapplicable)

of the application on which priority is claimed;

was filed as PCT international Application No.

date and application number of said application when known.

and for which a patent application:

amendment referred to above.

Regulations, \$1,56.

My residence, post office address and citizenship are as stated below at 201 et seq. beneath my name.

is attached hereto and includes amendment(s) filed on (stapplicable)

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled HAPTEN-CARRIER CONJUGATES FOR USE IN DRUG ABUSE THERAPY AND METHODS FOR PREPARATION OF SAME

Was filed in the United States on August 22, 2003 as Application No. 10/647,071 (for declaration not accompanying application)

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on

I acknowledge the duty to disclose information known to me to be material to patentability as defined in Title 37, Code of Federal

I hereby state that I have reviewed and understand the contents of the above identified application, including the claims, as amended by any

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EARLIEST FOREIGN APPLICATION(S), IF ANY, FILED PRIOR TO THE FILING DATE OF THE APPLICATION

	COUNTRY		F FILING onth, year)	PRIORITY CLAIMED
APPLICATION NUMBER	COUNTRY		YES	□ 00 □
			YES	по п
hereby claim the benefit under T	itle 35, United States Code, §1	19(e) of any United State	s provisional application(s	i) listed below.
P <u>ROVISIONAL AP</u>	PLICATION NUMBER		FILING DAT	E
hereby claim the benefit under T matter of each of the claims of thi paragraph of Title 35, United States as defined in Title 37, Code of Fe- national or PCT international filin	s application is not disclosed in es Code §112. I acknowledge in deral Regulations, §1.56 which	n the prior Cilited States a	prior known to me which	is material to patentability
NON-PROVISIONAL	FILING DATE		_STATUS	
APPLICATION SERIAL NO.	. i.b.i.i.d bittle	PATENTED	PENDING	ABANDONED
08/720 487	September 30, 1996	⊠		

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FULL NAME OF INVENTOR POST OFFICE ADDRESS FULL NAME OF INVENTOR Set Control of C. RESIDENCE & CITY Lakeville POST OFFICE ADDRESS FULL NAME OF INVENTOR CITY OF INVENTOR O		ADDRESS			Canada	
OF INVENTOR Schad Victoria C. RESIDENCE & CTY Lakeville MA United States of America POST OFFICE ADDRESS POST OFFICE ADDRESS FULL NAME OF INVENTOR BY POST OFFICE ADDRESS POST OFFICE ADDRESS POST OFFICE ADDRESS FULL NAME OF INVENTOR BY RESIDENCE & CTY Newton MA United States of America POST OFFICE ADDRESS FULL NAME OF INVENTOR BY RESIDENCE & CTY Newton MA United States of America POST OFFICE ADDRESS FULL NAME OF INVENTOR BY RESIDENCE & CTY Newton MA United States of America POST OFFICE ADDRESS FULL NAME OF INVENTOR BY POST OFFICE ADDRESS FULL NAME OF INVENTOR BY RESIDENCE & CTY CTY RESIDENCE & CTY OF INVENTOR BY RESIDENCE & CTY OF INVENTOR OF INVENTOR BY POST OFFICE ADDRESS FULL NAME OF INVENTOR BY CHECK OFFICE ADDRESS FULL NAME OF INVENTOR BY FIRET NAME OF INVENTOR BY CHECK OFFICE ADDRESS FULL NAME OF INVENTOR BY FIRET NAME OF INVENTOR BY CHECK OFFICE ADDRESS FULL NAME OF INVENTOR BY FIRET NAME OF			SIGNATURE OF INVENTOR 291		DATE	
OF INVENTOR Schad Victoria C. RESIDENCE & CTY Lakeville MA United States of America POST OFFICE ADDRESS POST OFFICE ADDRESS FULL NAME OF INVENTOR BY POST OFFICE ADDRESS POST OFFICE ADDRESS POST OFFICE ADDRESS FULL NAME OF INVENTOR BY RESIDENCE & CTY Newton MA United States of America POST OFFICE ADDRESS FULL NAME OF INVENTOR BY RESIDENCE & CTY Newton MA United States of America POST OFFICE ADDRESS FULL NAME OF INVENTOR BY RESIDENCE & CTY Newton MA United States of America POST OFFICE ADDRESS FULL NAME OF INVENTOR BY POST OFFICE ADDRESS FULL NAME OF INVENTOR BY RESIDENCE & CTY CTY RESIDENCE & CTY OF INVENTOR BY RESIDENCE & CTY OF INVENTOR OF INVENTOR BY POST OFFICE ADDRESS FULL NAME OF INVENTOR BY CHECK OFFICE ADDRESS FULL NAME OF INVENTOR BY FIRET NAME OF INVENTOR BY CHECK OFFICE ADDRESS FULL NAME OF INVENTOR BY FIRET NAME OF INVENTOR BY CHECK OFFICE ADDRESS FULL NAME OF INVENTOR BY FIRET NAME OF						
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O CITIZENSHIP LAKEVILLE MA United States of America POST OFFICE ADDRESS FULL NAME OF INVENTOR 201 FULL NAME OF INVENTOR OF I		OF INVENTOR	Schad	Victoria	c.	
CITIZENSHIP Lakeville MA United States of America POST OFFICE ADDRESS 24 County Street Cry Lakeville MA O2347 BIONATURE OF INVENTOR 193 POST OFFICE ADDRESS 24 County Street MA O2347 BIONATURE OF INVENTOR 193 POST OFFICE ADDRESS 24 Cry Meword MA United States of America Cry MA United States of America Cry MA O2465 FULL NAME OF INVENTOR MA United States of America Cry MA O2465 FULL NAME OF INVENTOR MA United States of America Cry MA O2465 FULL NAME OF INVENTOR MA A CRY MANE OF INVENTOR MA O2465 FULL NAME OF INVENTOR MA A CRY MANE OF INVENTOR MA A CRY MANE OF INVENTOR MA O2465 FULL NAME OF INVENTOR MA A CRY MANE OF INVENTOR MA O2465 FULL NAME OF INVENTOR MA A CRY MANE OCCUPATY OF INVENTOR MA O2467 POST OFFICE ADDRESS CRY Chestnut Hill MA O2467 BIONATURE OF INVENTOR MA BOOM OF INVENTOR MA O2467 BIONATURE OF INVENTOR MA O2467 FULL NAME OCCUPATY OCCUP		RESIDENCE &	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENS	SHIP
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OF INVENTOR OF INV			SIGNATURE OF INVENTOR 202		DATE	
OF INVENTOR OF INV						
OF INVENTOR Greenstein Julia L. RESIDENCE & CITY STATE OF FORMON COUNTRY MANUEL		FULL NAME	LAST NAME	FIRST NAME	MIDDLENAME	
POST OFFICE ADDRESS FILL NAME OF INVENTOR BAD STATE OF INVENTOR SET OF INVENT			Greenstein	Julia		
POST OFFICE ADDRESS FILL NAME OF INVENTOR BAD STATE OF INVENTOR SET OF INVENT	2	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENS	HIP
POST OFFICE ADDRESS 174 Mount Veronon Street Newton MA 02465 FORTHUM PROPRIED ATE FULL NAME OF INVENTOR SID FULL NAME CONTENT OR ENGLY OF INVENTOR SID FULL NAME CONTENT OR	0		Newton	MA		
POST OFFICE ADDRESS 174 Mount Veronon Street Newton MA 02465 Newton MA 02465 Newton MA 02465 DATE FULL NAME OF INVENTOR Exley A RESIDENCE & CTY Chestnut Hill POST OFFICE ADDRESS FULL NAME OF INVENTOR DATE FULL NAME OF INVENTOR DATE OFFICE ADDRESS FULL NAME OF INVENTOR DATE OFFICE ADDRESS FULL NAME OF INVENTOR DATE OFFICE ADDRESS FULL NAME OF INVENTOR DATE OFFICE ADDRESS FULL NAME OF INVENTOR DATE OFFICE ADDRESS FULL NAME OF INVENTOR DATE OFFICE ADDRESS FULL NAME OFFICE ADDRESS FULL	3		STREET	CITY		
FULL NAME LAST NAME POST OFFICE ADDRESS BIGNATURE OF PROPERTIOR 300 DATE			174 Mount Veronon Street			
FULL NAME OF INVENTOR RESIDENCE & CITY ADDRESS POST OFFICE OF INVENTOR RESIDENCE & CITY Chestruit Hill MA LAST NAME OF INVENTOR OWNERY OF CITIZENSHIP OF INVENTOR RESIDENCE & CITY ADDRESS RESID		ADDRESS			1	02403
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2 RESIDENCE & CITY STATEOR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP Wayland MA United States of America POST OFFICE ADDRESS 26 Pemberon Rd. Wayland MA 01778		FULL NAME	LAST NAME	FRST NAME		
0 5 5 CITIZENSHIP (Mayland) MA United States of America POST OFFICE ADDRESS 26 Pemberton Rd. CRY STATION COLNITY AMERICAN AMARIAN AMA			Fox (Barbara		
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POST OFFICE ADDRESS 26 Pemberton Rd. CTY Wayland MA 27700B 01778			Wayland	MA	,	
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ADDRESS			26 Pemberton Rd.	Wayland	1	
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·			MGNATURE OF INVENTOR 205		DATE	
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JONES DAY DOCKET NO. 11662-003-999

		SIGNATURE OF INVENTOR 365		DATE	
	POST OFFICE ADDRESS	56 Knowlton Circle	Upton	STATE OR COUNTRY MA	21F CODE 01568
2 0 6	RESIDENCE & CITIZENSHIP	Upton	STATE OR FOREIGN COUNTRY MA	United States of	
	FULL NAME OF INVENTOR	Powers	Stephen	MIDDLE NAME P.	

DECLARATION FOR NON-PROVISIONAL PATENT APPLICATION'

named invento	

My residence, post office address and citizenship are as stated below at 201 et seg, beneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled HAPTEN-CARRIER CONJUGATES FOR USE IN DRUG ABUSE THERAPY AND METHODS FOR PREPARATION OF SAME

and	for which a patent application:
	is attached hereto and includes amendment(s) filed on (if applicable)
57	C1 12 4 13 2 10 2 10 2 10 2 10 2 10 2 10 2 10 2

- was filed in the United States on August 22, 2003 as Application No. 10/647,071 (for declaration not accompanying application)
- with amendment(s) filed on (if applicable) was filed as PCT international Application No. on and was amended under PCT Article 19 on (if applicable)
- I hereby authorize and request the attorneys at Jones Day to insert herein parentheses (Application No. filed) the filing date and application number of said application when known.
- I hereby state that I have reviewed and understand the contents of the above identified application, including the claims, as amended by any amendment referred to above.
- I acknowledge the duty to disclose information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

EARLIEST FOREIGN APPLICATION(S), IF ANY, FILED PRIOR TO THE FILING DATE OF THE APPLICATION							
APPLICATION NUMBER	COUNTRY	DATE OF FILING COUNTRY (day, month, year) PRIORITY CLAIM					
			YES 🗆	NO □			
			YES 🗆	NO □			

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.

PROVISIONAL APPLICATION NUMBER	FILING DATE

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code \$112. I acknowledge the duty to disclose information known to me which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

NON-PROVISIONAL APPLICATION SERIAL NO	FILING DATE	STATUS		
APPLICATION SERIAL NO.		PATENTED	PENDING	ABANDONED
08/720,487	September 30, 1996	⊠		

NYI-4228672v1 (1)

For use only when the application is assigned to a company, partnership or other organization.

I hereby declare that all stakements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willfulf false statements and the like so made are pumbshable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willfulf false statements may peopartize the validity of the application or any patien issuing thereon.

	FULL NAME OF INVENTOR	LAST NAME Swain	Philip	MIDDLE NAME A.		
2	RESIDENCE & CITIZENSHIP	cny Beaconsfield	STATE OR FOREIGN COUNTRY Quebec, Canada	COUNTRY OF CITIZEN United Kingdo		
1	POST OFFICE ADDRESS	50 Kirkwood Avenue	спу Beaconsfield	STATE OR COUNTRY Quebec, Canada	H9W 5L4	
		SIGNATURE OF INVENTOR 201		DATE		
	FULL NAME OF INVENTOR	Schad LAST NAME	Victoria	MIDDLE NAME C.		
2	RESIDENCE & CITIZENSHIP	Lakeville	STATE OR FOREIGN COUNTRY MA	United States of		
•	POST OFFICE ADDRESS	24 County Street	CITY Lakeville	MA STATE OR COUNTRY	ZIP CODE 02347	
		SIGNATURE OF INVENTOR 202		DATE		
	FULL NAME OF INVENTOR	Greenstein	FIRST NAME Julia	MIDDLE NAME L.		
	RESIDENCE & CITIZENSHIP	Newton	STATE OR FOREIGN COUNTRY MA	United States of America		
	POST OFFICE ADDRESS	174 Mount Veronon Street	Newton	MA STATE OR COUNTRY	21P CODE 02465	
		SIGNATURE OF INVENTOR 203		DATE		
	FULL NAME OF INVENTOR	LAST NAME Exley	FIRST NAME Mark	MIDDLE NAME A.		
	RESIDENCE & CITIZENSHIP	Chestnut Hill	STATE OR FOREIGN COUNTRY MA	COUNTRY OF CITIZENSHIP United Kingdom		
	POST OFFICE ADDRESS	201 Reservoir Road	Chestnut Hill	STATE OR COUNTRY MA	21P CODE 02467	
		SIGNATURE OF INVENTOR 204		DATE		
	FULL NAME OF INVENTOR	LAST NAME FOX	FIRST NAME Barbara	MIDDLE NAME S.		
	RESIDENCE & CITIZENSHIP	спу Wayland	STATE OR FOREIGN COUNTRY MA	COUNTRY OF CITIZENSE United States of		
	POST OFFICE ADDRESS	26 Pemberton Rd.	Wayland	MA STATE OR COUNTRY	ZIP CODE 01778	
		SIGNATURE OF INVENTOR 205	5.5	DATE NOV. 16, 2	2009	

		SIGNATURE OF INVENTOR 205		DATE	DATE	
	POST OFFICE ADDRESS	56 Knowlton Circle	CITY Upton	MA STATE OF COUNTRY	ZIP CODE 01568	
0	RESIDENCE & CITIZENSHIP	Upton	STATE OR FOREIGN COUNTRY MA	United States of		
	FULL NAME OF INVENTOR	Powers	Stephen	P.		

DECLARATION FOR NON-PROVISIONAL PATENT APPLICATION'

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. beneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled

HAPI	EN-CARRIER CONJUGATES FOR USE IN DRUG ABUSE THERAPY AND METHODS FOR PREPARATION OF SAME
and for	r which a patent application:
□ i	is attached hereto and includes amendment(s) filed on (of applicable)
	was filed in the United States on August 22, 2003 as Application No. 10/647,071 (for declaration not accompanying application) with amendment(s) filed on (of applicable)
	was filed as PCT international Application No. on and was amended under PCT Article 19 on (if applicable)
	y authorize and request the attorneys at Jones Day to insert herein parentheses (Application Nofiled) the filing id application number of said application when known.
I hereb amend	y state that I have reviewed and understand the contents of the above identified application, including the claims, as amended by any ment referred to above.

I acknowledge the duty to disclose information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

			ATION	
COUNTRY	DATE OF FILING (day, month, year)	PRIORIT	PRIORITY CLAIMED	
		YES 🗆	NO □	
	COUNTRY		COUNTRY (day, month, year) PRIORIT	

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.

PROVISIONAL APPLICATION NUMBER	FILING DATE

I hereby claim the benefit under Title 35. United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code §112. a lacknowledge the duty to disclose information known to me which is material to paratability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

NON-PROVISIONAL APPLICATION SERIAL NO.	FILING DATE	STATUS		
AFFEICATION SERIAL NO.		PATENTED	PENDING	ABANDONED
08/720,487	September 30, 1996	⊠		

For use only when the application is assigned to a company, partnership or other organization.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patient issuing thereon.

	FULL NAME	LAST NAME	FIRST NAME	MIDDLE NAME		
	OF INVENTOR	Swain	Philip	Α.		
0	RESIDENCE & CITIZENSHIP	Beaconsfield	STATE OR FOREIGN COUNTRY Quebec, Canada	United Kingde		
1	POST OFFICE ADDRESS	50 Kirkwood Avenue	спу Beaconsfield	STATEOR COUNTRY Quebec, Canada	H9W 5L4	
		SIGNATURE OF INVENTOR 201		DATE		
	FULL NAME OF INVENTOR	LAST NAME Schad	FIRST NAME Victoria	MIDDLE NAME C.		
2 0 2	RESIDENCE & CITIZENSHIP	cuv Lakeville	STATE OR FOREIGN COUNTRY MA	COUNTRY OF CHIZZEN United States		
	POST OFFICE ADDRESS	24 County Street	Lakeville	MA STATE OR COUNTRY	2IP CODE 02347	
		SIGNATURE OF DIVENTOR 202		DATE		
	FULL NAME OF INVENTOR	LASTNAME Greenstein	HRST NAME Julia	MIDDLE NAME		
2 0 3	RESIDENCE & CITIZENSHIP	Newton	STATE OR FOREIGN COUNTRY MA	COUNTRY OF CITIZENSHIP United States of America		
	POST OFFICE ADDRESS	174 Mount Veronon Street	Newton	MA STATE OR COUNTRY	2IP CODE 02465	
		SIGNATURE OF INVENTOR 203		DATE		
	FULL NAME OF INVENTOR	LAST NAME Exley	FIRST NAME Mark	MIDDLE NAME A.		
	RESIDENCE & CITIZENSHIP	Crry Chestnut Hill	STATE OR FOREIGN COUNTRY MA	COUNTRY OF CITIZENSHIP United Kingdom		
	POST OFFICE ADDRESS	201 Reservoir Road	Chestnut Hill	STATE OR COUNTRY MA	21P CODE 02467	
		SIGNATURE OF INVENTOR 204		DATE		
_	FULL NAME OF INVENTOR	LAST NAME Fox	FIRST NAME Barbara	MIDDLE NAME S.		
	RESIDENCE & CITIZENSHIP	eny Wayland	STATE OR FOREIGN COUNTRY MA	COUNTRY OF CITIZENS	COUNTRY OF CITIZENSHIP United States of America	
	POST OFFICE ADDRESS	26 Pemberton Rd.	eny Wayland	STATE OR COUNTRY MA	21P CODE 01778	
	L	SIGNATURE OF INVENTOR 205		DATE		

JONES DAY DOCKET NO. 11662-003-999

	FULL NAME OF INVENTOR	Powers	FIRST NAME Stephen	NIDOLE NAME P.	
0 6	RESIDENCE & CITIZENSHIP	cm Upton	STATE OR FOREIGN COUNTRY MA	COUNTRY OF CITIZENS United States of	
	POST OFFICE ADDRESS	56 Knowlton Circle	Upton	STATE OR COUNTRY MA	21F CODE 01568
		SIGNATURE OF INVENTOR 2019	P. Pows	// - /2	-09